PLAINTIFF UNITED STATES OF AMERICA							CR No. 03-10396-NG			
DEFENDANT KAM WAI CHUI							TYPE OF PROCESS Preliminary Order of Forfeiture			
SERVE	NAME OF INDIVIDUAL, COMPANY, CORPORATION, ETC. TO SERVE OR DESCRIPTION OF PROPERTY TO SEIZE OR CONDEMN									
•	PUBLICATION							= 7	(
AT	ADDRESS (Street or RFD, Apartment No., City, State, and ZIP Code)						(2)	Ž)		
SEND NOTICE OF SERVICE TO REQUESTER AT NAME AND ADDRESS BELOW:							Number of process to be served with this Form - 285			
Kristina E. Barclay, Assistant U.S. Attorney United States Attorney's Office John Joseph Moakley United States Courthouse 1 Courthouse Way, Suite 9200 Boston, MA 02210						in this case			co.	
						Check for ser	vice on U.S.A.	ins.	ဂ	
SPECIAL INSTRUCTIONS OR OTHER INFORMATION THAT WILL ASSIST IN EXPEDITING SERVICE (Include Business and Alternate Address, All Telephone Numbers, and Estimated Times Available For Service)										
Please publish the attached Notice of Order of Forfeiture at least once for three (3) successive weeks in the <u>BostonHerald</u> or any other newspaper of general circulation in the District of Massachusetts, in accordance with the attached Preliminary Order of Forfeiture and applicable law.										
LJT x3283										
W ∧ / \ \							TELEPHONE NUMBER DATE (617) 748-3100 March 15, 200		15 2005	
SPACE BELOW FOR USE OF U.S. MARSHAL ONLY - DO NOT WRITE BELOW THIS LINE										
Lacknowledge rece	int for the total	Total Process	District of Origin	District to Serve			Deputy or Clerk	-	Date	
number of process (Sign only first USM one USM 285 is sub	dicated. 285 if more than nitted) No		No. 38 No. 38 Ma		May	uff Mign			3/24/05	
I hereby certify and return that I have personally served, have legal evidence of service, have executed as shown in "Remarks", the process described on the individual, company, corporation, etc., shown at the address inserted below.										
I hereby certify and return that I am unable to locate the individual, company, corporation, etc., named above (See remarks below).										
Name and title of individual served (If not shown above).							A person of suitable age and discretion then residing in the defendant's usual place of abode.			
Address (complete only if different than shown above)						Date of Se	rvice 6/05	Time am		
·						Signature	Signature of U.S. Marshal or Deputy			
Service Fee	Total Mileage Cl (including endeat		ng Fee Total C	Charges A	dvance Deposits	Amount O	wed to US Marshal	or Am	ount or Refund	
March 29, April 5, 12/05.										
PRIOR EDITIONS MAY BE USED 1. CLERK OF THE COURT FORM USM 285 (Recognitions)								5 (Rev. 12/15/80)		